Submit 3 Copies to Appropriate District Office

District I
P.O. Box 1980, Hobbs, NM 88240

District II
P.O. Box 1980, Hobbs, NM 88240

District III
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONVERSATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 30 - 025 - 29291

5. Indicate Type of Lease STATE [ ] FEE [X]

6. State Oil & Gas Lease No. NMNM84603X

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit agreement Name: CENTRAL CORBIN QUEEN UNIT

1. Type of Well: OIL WELL [ ] GAS WELL [ ] OTHER WATER INJECTION

2. Name of Operator: OXY USA INC.

8. Well No. 601

3. Address of Operator: P.O. Box 50250 Midland, TX 79710

9. Pool name or Wildcat: CORBIN QUEEN, CENTRAL

4. Well Location
Unit Letter M : 330 Feet From The SOUTH Line and 330 Feet From The WEST Line
Section 3 Township 18 S Range 33 E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[X]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			OTHER: CONVERT TO WATER INJECTION R9337	[X]		

12. Describe Proposed or Complete Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any work) SEE RULE 1103.

TD - 5052' PBTD - 4278' PERFS - 4219' - 4266'

MIRU PU, POOH W/ RODS, PUMP & TBG, NDWH, NUBOP. CO TO 4278', RIH W/ RTTS & SET @ 4124', TEST CSG TO 1000#, HELD OK. ACIDIZE QUEEN PERFS (4219'-4266') W/ 2000 GAL 15% NeFe HCl ACID, SWAB BACK LOAD. POOH, RIH W/ GUIBERSON C-6 PKR & 2-3/8" CL TBG & SET @ 4110'. NDBOP, NUWH, CIRC W/ PKR FLUID, TEST CSG TO 300#, HELD OK, RDPU. WELL READY FOR INJECTION.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE _____ TITLE Production Accountant DATE 12 10 91

TYPE OR PRINT NAME David Stewart TELEPHONE NO. 915 685-5717

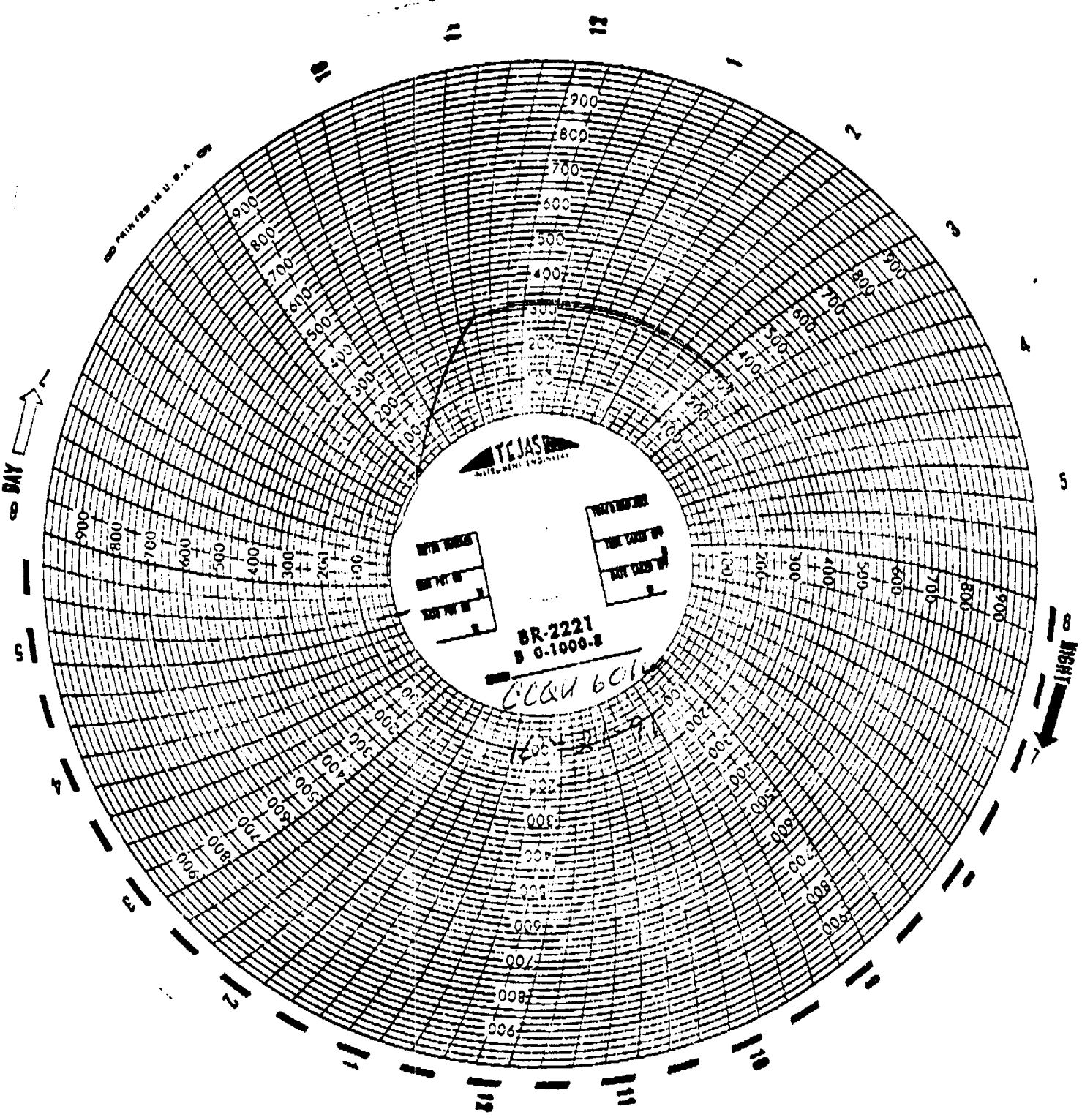
(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

V I
R B N

E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